

Research (ICMR) and its Institutes/Centres, selection of the Director NIN, Hyderabad was made direct recruitment through open advertisement and based on recommendations of the Selection Committee consisting of eminent scientists and nutritionists in the field.

(b) Like any other institute of ICMR, due attention has been given to NIN, Hyderabad in terms of capacity strengthening, infrastructure building alongwith increase in the yearly budget.

(c) ICMR is not over burdened with work. However, with the expansion of various scientific activities requirement for man-power and infrastructure has increased.

(d) There is no proposal to bifurcate ICMR. However, a proposal for creation of new Department of Health Research within the Ministry of Health and Family Welfare is under consideration.

Underweight children in the country

325. SHRI PRASANTA CHATTERJEE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether according to UNICEF report 2005, there are at least 57 million underweight children in the country; and

(b) if so, the action being taken by Government to overcome this problem?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) Yes, Sir. As per the UNICEF report published in May, 2006 there are 57 million underweight children in India.

(b) The action being taken by the Government under the National Rural Health Mission (NRHM) to overcome the problem is as follows:

1. Implementing the Integrated Management of Childhood Illnesses (IMNC) which includes management of the commonest causes of neonatal and childhood illnesses and malnutrition.
2. Implementing the Infant and Young Child Feeding (IYCF) guidelines which have been developed by the Government of India.
3. Implementing supplementation with micronutrients - Vitamin A, Iron Folic Acid and salt fortification with Iodine.

4. Expansion of Integrated Child Development Scheme (ICDS) and revising the financial norms for supplementary nutrition under ICDS.
5. Revival of nutrition programme for adolescent girls.
6. Advocacy through Mass Media.
7. Various States have taken up these initiatives like the Bal Sanjeevani programme of Madhya Pradesh, Dular project of Bihar and Jharkhand and Malnutrition Eradication drive of Governments of Tamilnadu and Kerala.
8. Monthly Health & Nutrition days are being organized in every village with the help of the Anganwadi Workers, ANM (Auxillary Nurse Midwife) and the ASHA (Accredited Social Health Activists).

Schemes for improving Health Care System in rural and urban areas

†326. SHRI JAI PARKASH AGGARWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have formulated any scheme to improve the functioning of the hospitals and primary health centres of Central Government in the rural and urban areas of the country;

(b) if so, the details thereof; State-wise; and

(c) the amount allocated in the current financial year and the amount released so far?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) Yes, Sir. Under National Rural Health Mission [NRHM], the functioning of Sub Divisional/ Sub distt. Hospitals Community Health Centres (CHCs) and Primary Health Centres (PHCs) are to be improved through upgradation of these institutions to Indian Public Health Standards [IPHS]. IPHS detail the specifications of standards to which these institutions would have to be raised to so that the citizen is confident of getting public health services in the hospital that can be measured to be of acceptable standards. Each institution would,

†Original notice of the question was received in Hindi